## Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD

10/877112

| Literative October 1, 7.000  |  |   |                                 |                           |                              |                    |          | 10/02/1/11        |                        |          |                     |                        |  |
|--|--|---|---------------------------------|---------------------------|------------------------------|--------------------|----------|-------------------|------------------------|----------|---------------------|------------------------|--|
|  |  | CLAIMS A                                  | S FILED - PART I<br>(Column 1)  |                           | (Column 2)                   |                    |          | SMALL ENTITY TYPE |                        | OR       | OTHER<br>SMALL      |                        |  |
| TOTAL CLAIMS   |  |   |                                 |                           |                              |                    | R        | ATE               | FEE                    |          | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED                    |                           | NUMBER EXTRA                 |                    | BAS      | IC FEE            | 385.00                 | OR       | BASIC FEE           | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | IB minus 20≈                    |                           |                              |                    | ×        | S 9=              |                        | OR       | X\$18≡              |                        |  |
| INDEPENDENT CLAIMS   |  |   | 3 minus 3 = 1                   |                           | ·                            |                    | X        | 43::              |                        | QВ       | 2.86%               | _                      |  |
| MULTIPLE DEPENDENT CLAIM P   |  |   | RESENT                          |                           |                              |                    |          | 45::              |                        | OR       | +290≈               |                        |  |
| * [[   | the difference   | in column 1 is                            | ess than zero, enter "0" in col |                           |                              | olumn 2            | L        | TAL.              |                        | OR       | TOTAL               |                        |  |
| f  | 12 Amot c  | LAIMS AS A                                | MENDED - PARȚ II<br>(Column 2)  |                           |                              | :Column 3)         |          |                   | ENTITY                 | OB       | OTHER<br>SMALL      |                        |  |
| AMENDMENT A  | A  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                 | FIREVIO<br>PREVIO<br>PAID | BER<br>DUSUr                 | PRESENT<br>CXTRA   | R        | ΛΤΕ               | TIONAL<br>FEE          |          | RATE.               | TIÓNAL<br>FEE          |  |
|  | Total  | . 18                                      | Minus                           | 6                         | <i>{D_</i>                   | 3                  | X        | \$ 9=             |                        | OR       | XS18=               |                        |  |
|  | Independent  | . 3                                       | Minus                           | •••                       | 3_                           | <u> </u>           | X        | 43÷ <b>-</b>      |                        | OR       | X86=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                 |                           |                              |                    |          | 15-               |                        |          | +290=               |                        |  |
| BEST AVAILABLE COPY +145=  |  |   |                                 |                           |                              |                    |          |                   |                        | OR<br>OR | TOTAL<br>ADDIT FEE  |                        |  |
| ADDIT FEE COlumn 1) (Column 2) (Column 3)  |  |   |                                 |                           |                              |                    |          |                   |                        |          |                     |                        |  |
| AMENDMENT B  |  | CLAIMS REMAINING AFTER AGENDMENT          |                                 | LUSEAN<br>MOM<br>HICH     | HEST<br>IBER                 | PRESENT<br>ENTRA   | IR.      | ATE               | ADDI<br>TIONAL<br>PER  |          | BATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •   | Lances                          |                           |                              |                    |          | 5 %               |                        | ਼ਿਸ      | X\$18 /             |                        |  |
|  | Independent  | *   | Minus                           | ***                       |                              | =                  | ]        | 43:               |                        | OR       | X86=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                 |                           |                              |                    | ]        |                   | <del> </del>           | 1        | 200                 | 1                      |  |
| +145   |  |   |                                 |                           |                              |                    |          |                   | OH                     | +290 =   |                     |                        |  |
|  |  |   | •                               |                           |                              |                    | ADD      | TOTAL<br>OF TREE  |                        | OR       | ADDIT FEE           |                        |  |
|  |  | (Column 1)                                |                                 |                           | mn 2)                        | (Column 3)         | <b>.</b> |                   |                        | _        |                     |                        |  |
| AMEND MENT C   | N -  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                 | NUM<br>PREVI              | HEST<br>HBER<br>OUSLY<br>FOR | PRESENT<br>. EXTRA | R        | ATE               | AUÜI-<br>TIONAL<br>FEE |          | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus                           | 6.0                       |                              | ]=                 | ]   x    | \$ 9±             |                        | OR       | X\$18=              |                        |  |
|  | Independent  | *   | Minus                           | 6: <del>6-4</del>         |                              | =                  | ]        | 43=               |                        | OR       | X86=                |                        |  |
| ⋖  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                                 |                           |                              |                    |          |                   |                        | 1        |                     |                        |  |
| +145= .  |  |   |                                 |                           |                              |                    |          |                   |                        | OR       | +290=               | ļ                      |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE |  |   |                                 |                           |                              |                    |          |                   |                        | OR       | TOTAL<br>ADDIT, FEE |                        |  |
|  | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                                 |                           |                              |                    |          |                   |                        |          |                     |                        |  |